PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999											.		
								1000000					
(Column 1) (Column 2)						SMALL ENTITY TYPE			OR	OTHER'SMALL E			
FO	a/	NUMBE	R FILED	NUMBER E	NUMBER EXTRA		E	FEE		RATE	FEE .		
BAS	IC FEE	,						345.00	OR		690.00		
TOT	AL CLAIMS	2	minus 20		X\$ 9=			OR	X\$18=	OZA			
	PENDENT CL		minus 3	= '		X39=			OR	X78=	28		
MULTIPLE DEPENDENT CLAIM PRESENT						+130=		ÓЯ	+260=				
If the difference in column 1 is less than zero, enter "0" in column 2							ΆL		OR	TOTAL	824		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						OTHER TH							
AMENDMENT A	3/19/04	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	.23	Minus	- 27	-	X\$	9=		OR	X\$18=			
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /							0=		OR	+260=			
						ADDIT	OTAL		OR	TOTAL ADDIT, FEE	0		
(Column 1) (Column 2) (Column 3)							ree		•				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE	•	RATE	ADDI- TIONAL FEE		
	Total	· 2:3	Minus .	- 27.	. _	XS	9=		OR	X\$18=			
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							30=		ОЯ	+260=			
							OTAL FEE		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	••		XS	9=		OR	X\$18=			
	Independent	•	Minus	•••	<u>-</u>	X3	9=		OR	X78=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 	1				
	If the enter in each	mn 1 is less than 1	ha antry in colu	ma 2 waite 10° in co	akuma 3.	+13			OR	L.	 		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE													
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-679

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